



General Assembly

February Session, 2000

***Amendment***

LCO No. 3907

Offered by:

SEN. HARP, 10<sup>th</sup> Dist.

To: Subst. Senate Bill No. 437

File No. 201

Cal. No. 187

***"An Act Establishing A Blue Ribbon Commission On  
The Future Of Hospitals."***

1 In line 1, before "(a)" insert "Section 1."

2 After line 47, insert the following:

3 "Sec. 2. (NEW) (a) As used in this section:

4 (1) "Commissioner" means the Commissioner of Health Care Access;

5 (2) "Hospital" means any short-term acute care general hospital  
6 licensed by the Department of Public Health; and

7 (3) "Payer" shall have the same meaning as provided in section 19a-  
8 646 of the general statutes, but does not include any patient or member  
9 of a patient's family responsible for payment, in whole or in part, of the  
10 patient's hospital bill.

11 (b) Upon the request of any hospital, or at the discretion of any  
12 payer, a payer shall make uniform periodic payments to such hospital  
13 for health care services paid for by such payer. Payments shall be

14 made on a weekly basis. Each uniform payment amount shall be  
15 equivalent to one fifty-second of the total payments made by the payer  
16 to the hospital for the hospital's most recently audited fiscal year. Each  
17 calendar quarter, periodic payments made during the previous  
18 calendar quarter shall be reconciled with actual payments that should  
19 have been made for the quarter being reconciled, and interim  
20 payments subsequent to such reconciliation shall be adjusted  
21 accordingly so that interim payments are as close to actual anticipated  
22 payments as possible.

23 (c) Any payer that has been requested to make payments pursuant  
24 to subsection (b) of this section and is able to demonstrate to the  
25 satisfaction of the commissioner that such payer (1) is fully capable of  
26 making required payments to hospitals under existing payment  
27 arrangements, (2) agrees to do so promptly, and (3) is willing to enter  
28 into an agreed settlement with the Office of Health Care Access with  
29 respect to such representation and agreement, may be exempted by the  
30 commissioner from the requirements of this section. Applications for  
31 exemption shall be made on forms prescribed by the commissioner.  
32 Applicant payers shall provide each hospital that requested payment  
33 pursuant to subsection (b) of this section with a copy of the exemption  
34 application, and such hospital shall be permitted to comment on the  
35 application. In the event that a hospital notifies the commissioner that  
36 a payer that has been granted an exemption under this section is not  
37 making regular payments to the hospital, the commissioner shall  
38 investigate and, if appropriate, may revoke the exemption. Any payer  
39 granted an exemption shall promptly perform a final reconciliation in  
40 the manner specified in subsection (b) of this section. Notwithstanding  
41 the provisions of this subsection, a payer and a hospital may agree at  
42 any time that the payer no longer shall be obligated to make periodic  
43 interim payments pursuant to subsection (b) of this section.

44 (d) Failure of a payer to comply with the provisions of this section  
45 or with the terms of an agreed settlement with the commissioner shall  
46 constitute an unfair or deceptive trade practice under subsection (a) of  
47 section 42-110b of the general statutes.

48       (e) The commissioner shall adopt regulations, in accordance with  
49       chapter 54 of the general statutes, to carry out the provisions of this  
50       section.

51       Sec. 3. This act shall take effect from its passage."